DEPARTMENT OF HEALTH SERVICES

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June 4, 1985

TO: All County Welfare Directors
All County Administrative Officers

Letter No. 85- 44

SUBMISSION OF REQUESTS FOR DISABILITY EVALUATIONS FOR MEDI-CAL

Recently it has come to our attention that, in order to avoid excessive denial rates, disability evaluations are being requested from the Disability Evaluation Division (DED) of the Department of Social Services (DSS) prior to acceptance of an application for Medi-Cal. If DED subsequently determines the individual to be disabled, a Medi-Cal application is then accepted and, in some cases, back-dated.

We recognize that this procedure is not the policy of all county welfare departments. However, neither DED nor the Department have been able to identify all counties in which this process is occurring. In addition, in several counties this procedure has been followed by the county health department (and in at least one case by a private hospital) without the knowledge or consent of the county welfare department.

This procedure violates current Department policy and regulations and poses several significant problems:

1. Title 22, CAC, Section 50167 states that one of the methods whereby the disability of a Medi-Cal applicant may be verified is by following the DED procedures. Section 50021 defines an applicant as the individual or family on whose behalf an application is made.

There is <u>no</u> regulatory authority that permits submission of a request for disability evaluation for an individual who is not a medically needy applicant.

2. Section 50143 states that any person who wishes to receive Medi-Cal may file an application. Refusal to permit an individual to file an application or refusal to accept such application is a violation of the individual's right to apply and is in violation of state law and Medi-Cal regulations.

- 3. Section 50151 states that the date of application is the date the completed application form is received by the county welfare department (CWD). Therefore, back-dating an application subsequent to a disability evaluation is not authorized by regulation.
- 4. The contract between DED and the Department of Health Services only authorizes DED to perform medically needy evaluations on applicants for Medi-Cal.
- 5. Most importantly, if there has been no application for Medi-Cal there has been no formal denial of aid. The individual does not receive a Notice of Action describing the basis of ineligibility for Medi-Cal and is not provided with an explanation of their state hearing rights on appealing the disability determination. This procedure constitutes a violation of the individual's right to due process.

Therefore, effective immediately, <u>no</u> requests for evaluation of disability as a medically needy person are to be submitted to DED unless a completed, signed and dated Application for Public Assistance, form CA 1, is received by the CWD in accordance with Section 50151.

Proof of application for Medi-Cal will be submitted to DED with the evaluation request in the form of a copy of the completed and signed CA 1. DED has been instructed to reject any requests for evaluation which do not include such proof of application.

Application for the County Medical Services Program (CMSP) or any other county administered medical program does not constitute application for Medi-Cal and a disability evaluation should not be submitted. However, in cases where application has been made for both the county medical program and Medi-Cal, the county health department (CHD) may request a disability evaluation providing:

- A. The application (CA 1) for Medi-Cal was made to the CHD and was immediately forwarded to the CWD.
- B. Established county procedures require the CHD worker to gather all the necessary information and complete all other Medi-Cal forms prior to submitting the case to the CWD for certification of eligibility.
- C. The completed, signed and dated CA 1 is in both the CHD and CWD case files and included in the disability evaluation request, and the date the CA 1 is received by the CWD is __considered_to_be_the_application_date_(Section 50151).

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D. If Medi-Cal eligibility is denied based on lack of disability, an adequate Notice of Action is issued stating the basis for the denial and providing the applicant with his/her state hearing rights.

Under no other circumstances is the CHD to request a medically needy disability evaluation and under no circumstance is such an evaluation to be submitted to DED by private hospitals, doctors, clinics or other unauthorized agencies or persons.

This procedure is only to be followed for medically needy disability evaluations and does not affect programs administered by the Department of Social Services (DSS), such as the In Home Supportive Services (IHSS) program.

If you have any questions, please contact Toni Bailey at (916) 324-4953.

Sincerely,

Original signed by

Tom J. Elkin, Acting Chief Medi-Cal Eligibility Branch

cc: Medi-Cal Liaisons

Medi-Cal Program Consultants

Expiration Date: September 1, 1985